

**CITY OF GROVE CITY**

4035 Broadway
Grove City, Ohio 43123
(614) 277-3000
Fax (614) 277-3011
www.ci.grove-city.oh.us

RECEIVED**NOV 17 2015****GC PLANNING COMMISSION**

**LOT SPLIT
APPLICATION
FEE \$50.00**

Date Submitted _____

PROJECT INFORMATION

PROJECT NAME 4895 Hoover Road Lot Split		
PROPERTY LOCATION 4895 Hoover Road		
PARCEL TAX ID # 040-004955		
EXISTING ZONING PUD-R & R-1		
PROPERTY OWNER ('S) Epcon Hoover LLC		
MAILING ADDRESS 500 Stonehenge Parkway Dublin, OH 43017		
DAYTIME TELEPHONE ()	FAX NUMBER ()	E-MAIL

APPLICANT/AGENT

NAME OF APPLICANT City of Grove City		
MAILING ADDRESS 4035 Broadway, Grove City, OH 43123		
DAYTIME TELEPHONE ()	FAX NUMBER ()	E-MAIL info@grovecityohio.gov
DESIGNATED CONTACT PERSON		DAYTIME TELEPHONE 614-277-3000 ()

I, _____, the applicant or the applicant's duly authorized agent, have read and understand the contents of this submittal. The information contained, including attached exhibits, is complete and true/correct, to the best of my knowledge. This request conforms to the requirements of Section 1135.08.

Site visits to the property may be necessary by City representatives. The Owner/Applicant hereby authorizes representatives to visit and/or photograph the property described in this application.

Signature of Applicant _____

Date _____

Signature of Owner *By: Jim O'Connor, Vice Pres.*Date *17 November 2015***FOR OFFICE USE ONLY**

DATE RECEIVED	PAYMENT RECEIVED/AMOUNT	CHECK NUMBER
RECEIVED BY	DATE SCHEDULED FOR PLANNING COMMISSION	
PROJECT ID #	PLANNING COMMISSION ACTION APPROVED _____ DISAPPROVED _____	